

<i>SERFF Tracking Number:</i>	<i>LFSC-126614693</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>LifeSecure Insurance Company</i>	<i>State Tracking Number:</i>	<i>45623</i>
<i>Company Tracking Number:</i>	<i>ADV-LS-0378B 05/10</i>		
<i>TOI:</i>	<i>LTC03I Individual Long Term Care</i>	<i>Sub-TOI:</i>	<i>LTC03I.001 Qualified</i>
<i>Product Name:</i>	<i>Multi-Life Proposal (B)</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Filing at a Glance

Company: LifeSecure Insurance Company	SERFF Tr Num: LFSC-126614693	State: Arkansas
Product Name: Multi-Life Proposal (B)	SERFF Status: Closed-Filed	State Tr Num: 45623
TOI: LTC03I Individual Long Term Care	Co Tr Num: ADV-LS-0378B 05/10	State Status: Closed
Sub-TOI: LTC03I.001 Qualified		Reviewer(s): Marie Bennett, Harris Shearer
Filing Type: Advertisement	Authors: Sue Howard, Judy Lucas, Karilynn Bagnell	Disposition Date: 05/12/2010
	Date Submitted: 05/10/2010	Disposition Status: Filed
Implementation Date Requested: On Approval		Implementation Date:

State Filing Description:

General Information

Project Name:	Status of Filing in Domicile: Pending
Project Number:	Date Approved in Domicile:
Requested Filing Mode: Review & Approval	Domicile Status Comments:
Explanation for Combination/Other:	Market Type: Individual
Submission Type: New Submission	Group Market Size:
Overall Rate Impact:	Group Market Type:
Filing Status Changed: 05/12/2010	Explanation for Other Group Market Type:
	State Status Changed: 05/12/2010
Deemer Date:	Created By: Karilynn Bagnell
Submitted By: Karilynn Bagnell	Corresponding Filing Tracking Number: LFSC-126556623
Filing Description:	
LifeSecure Insurance Company NAIC #77720	
Multi-Life Proposal: LS-0378B ST 05/10	
Previously Approved: LS-0378B ST 03/10	

Enclosed for your review and approval is form LS-0378B ST 05/10. This advertising form is new and intended to replace LS-0378B ST 03/10 which was recently approved by your department on 4/14/2010 (SERFF Tracking Number LFSC-126556623).

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The only change between the two forms is on page 3, paragraph 1. Two phrases were left out of LS-0378B ST 03/10. They have been added to LS-0378B ST 05/10:
LifeSecure's underwriting criteria, "which includes an applicant's age, health history and current health conditions. This proposal is valid for individuals...."

Should you require further information, please contact me at 810.220.4644 or kbagnell@lifeseecureltc.com.

Sincerely,
Karilynn Bagnell
Senior Compliance Specialist

Company and Contact

Filing Contact Information

Karilynn Bagnell, Senior Compliance Specialist kbagnell@lifeseecureltc.com
LifeSecure Insurance Company 810-220-8774 [Phone]
10559 Citation Drive 810-220-7707 [FAX]
Suite 300
Brighton, MI 48116

Filing Company Information

LifeSecure Insurance Company	CoCode: 77720	State of Domicile: Michigan
10559 Citation Drive	Group Code: 572	Company Type: Life, A & H
Suite 300	Group Name: BCBS of MI GRP	State ID Number:
Brighton, MI 48116	FEIN Number: 75-0956156	
(810) 220-8774 ext. [Phone]		

Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	No
Fee Explanation:	\$50.00 per form
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
LifeSecure Insurance Company	\$50.00	05/10/2010	36365903

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Marie Bennett	05/12/2010	05/12/2010

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Disposition

Disposition Date: 05/12/2010

Implementation Date:

Status: Filed

Comment:

Rate data does NOT apply to filing.

<i>SERFF Tracking Number:</i>	<i>LFSC-126614693</i>	<i>State:</i>	<i>Arkansas</i>
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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Statement of Variability		Yes
Form	Multi-Life Proposal		Yes

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Product Name:	Multi-Life Proposal (B)		
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Form Schedule

Lead Form Number: LS-0378B ST 05/10

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	LS-0378B ST 05/10	Advertising Multi-Life Proposal	Initial			LS-0378B ST 05.10-census.pdf

Multi-Life Proposal for Long Term Care Insurance



Prepared for: [Employer/Association Name]

Prepared by: [Agent Name]

[Agent Address]

[Agent Phone]

Date: [XX/XX/XXXX]

Rates quoted are for use in the state of [state name].

Premiums are subject to change.

www.YourLifeSecure.com

Multi-Life Proposal for Long Term Care Insurance



Plan Choice	Plan A [*]	Plan B [*]	Plan C [*]
Benefit Bank SM Amount	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
Monthly Benefit Access	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
Benefit Wait Period	90 Calendar Days	90 Calendar Days	90 Calendar Days
Inflation Protection Option	[Guaranteed Future Purchase Offers] [Automatic 5% Compound] [Automatic 3% Compound]	[Guaranteed Future Purchase Offers] [Automatic 5% Compound] [Automatic 3% Compound]	[Guaranteed Future Purchase Offers] [Automatic 5% Compound] [Automatic 3% Compound]
Money-Back Promise SM Option	[Included] [Excluded]	[Included] [Excluded]	[Included] [Excluded]
Lapse Protection Benefit	[Included] [Excluded]	[Included] [Excluded]	[Included] [Excluded]
Premium Payment Option	[Lifetime] [10-Year] [To-Age-65]	[Lifetime] [10-Year] [To-Age-65]	[Lifetime] [10-Year] [To-Age-65]
Employer Contribution Discount	[5%]	[5%]	[5%]
Discount	[5%]	[5%]	[5%]

Monthly Premium Amount

Eligible Participants	Age			
[FName, LName] [†] [††]	[42]	[\$12.56]	[\$13.69]	[\$16.33]
[FName, LName] [†] [††]	[35]	[\$9.86]	[\$10.58]	[\$14.31]
[FName, LName] [†] [††]	[59]	[\$43.21]	[\$46.11]	[\$52.97]
[FName, LName] [†] [††]	[40]	[\$12.00]	[\$14.25]	[\$17.11]
[FName, LName] [†] [††]	[32]	[\$8.76]	[\$9.98]	[\$12.36]
[FName, LName] [†] [††]	[61]	[\$45.89]	[\$49.74]	[\$54.09]
TOTAL MONTHLY PREMIUM		[\$793.68]	[\$866.10]	[\$1,003.02]
Average Monthly per Participant		[\$22.05]	[\$24.06]	[\$27.86]
TOTAL ANNUAL PREMIUM		[\$9,524.16]	[\$10,393.20]	[\$12,036.24]
Average Annual per Participant		[\$264.56]	[\$288.70]	[\$334.34]

[* This insurance plan is Partnership-qualified in the state of [state name].]

The premiums shown above are for illustrative purposes only. [These monthly premiums include an employer contribution discount percentage as shown above.] A spouse/domestic partner or couple's discount may also apply to individual applicants. Each applicant must complete an Application and must qualify for coverage based on LifeSecure's underwriting criteria, which includes an applicant's age, health history and current health conditions. This proposal is valid for individuals ages 18–84 submitting applications for LifeSecure's individual long term care insurance in the state of [state name].

The premiums shown above are based on LifeSecure's 'Preferred' rate class and are for illustrative purposes only. An applicant's actual premium rate class will be based on his/her own age, health history, current health conditions and other underwriting criteria. A spouse/domestic partner or couple's discount may also apply to individual applicants. Each applicant must complete an Application and must qualify for coverage based on LifeSecure's underwriting criteria. This proposal is valid for individuals ages 18–84 submitting applications for LifeSecure's individual long term care insurance in the state of [state name].

Any premium paid Monthly Direct-Bill by an individual will include an additional \$2.00 service fee. This service fee is *not* applicable for Monthly Employer List-Billing cases.

† These monthly premiums, as illustrated, include a 10% spouse/domestic partner discount.

†† These monthly premiums, as illustrated, include a 30% couple's discount (assuming that both spouses/domestic partners apply for coverage and policies are issued). Note: if one spouse/domestic partner does not apply or the policy is not issued, a 10% spouse/domestic partner discount will apply to the other's policy.

Plan Summary for Long Term Care Insurance



Benefit BankSM

Your Benefit Bank represents the lifetime dollar benefit amount available to you. Your Benefit Bank balance is reduced by any benefits paid to you or on your behalf.

Monthly Benefit Access Limit

Your Monthly Benefit Access Limit represents the dollar benefit amount available on a monthly basis for your long term care needs. The original dollar amount is calculated as a percentage of your Benefit Bank.

Benefit Payout Structure. When you become eligible for benefits, we will reimburse you for covered expenses for qualified long term care services up to your full Monthly Benefit each calendar month. These covered expenses include care at home through a home care agency or independent provider, or in an assisted living facility, adult day care center or in a nursing home. Hospice care is also covered.

If you do not incur covered expenses up to your full Monthly Benefit for a given calendar month, 50% of your unused monthly benefit will be available to you as a **Flexible Benefit**. The **Flexible Benefit** is not restricted by the definition of covered expenses. This benefit is designed to provide greater flexibility in the types of care, services and products available to you under this policy, such as: care provided by a family member or other informal caregiver, construction of a wheelchair access ramp, or installation of grab bars in your bathroom.

Guaranteed Future Purchase Offers

Under the Guaranteed Future Purchase Offers, you will be offered the opportunity to increase your current Benefit Bank and Monthly Benefit by 15% every three years. You may accept each offer without submitting evidence of insurability.

Waiver of Premium

Your premiums are waived beginning on the first day you start receiving benefits. As long as you continue to receive benefits, additional premiums will not be required. Premium payments will again be required after 30 days of not receiving benefits.

Benefit Wait Period

You are eligible to begin receiving benefits upon completion of a 90-day Benefit Wait Period. This is a period of time during which you meet the benefit triggers for this coverage. You do not need to be receiving paid services in order to accumulate Benefit Wait Period days, and your Benefit Wait Period need only be met once during your lifetime.

LifeSecure Care Advisor Services

A LifeSecure Care Advisor is available to you and your family from the day you receive your policy. The LifeSecure Care Advisor can help you with everything from long term care questions to recommendations for assisted living facilities to arrangements for personal care or services. The use of these services is optional and is provided at no cost to you.

Spouse or Domestic Partner Discounts

If you and your spouse or domestic partner both apply and the policies are issued, a 30% premium discount will apply to both policies. If your spouse or domestic partner does not apply, or the policy is not issued, a 10% discount will still apply to your policy.

Money-Back PromiseSM Option

If you die while your policy is in force for 5 or more years, a percentage of the premiums (less benefits paid) is refunded to a beneficiary. The percentage of payback equals 25% of the premiums paid if death occurs in policy years 5-9; 50% in years 10-14; and 75% in years 15 and beyond. Your policy must be in force at the time of death for the Money-Back Promise Option benefits to be payable.

Automatic 3% Compound Inflation Protection Benefit

We will automatically increase your current Monthly Benefit and your remaining Benefit Bank by 3% each year. The increase will be effective on each anniversary of your policy effective date, even while you are receiving benefits.

Automatic 5% Compound Inflation Protection Benefit

We will automatically increase your current Monthly Benefit and your remaining Benefit Bank by 5% each year. The increase will be effective on each anniversary of your policy effective date, even while you are receiving benefits.

Lapse Protection Benefit

If your policy is in force for at least three full years, and then terminates due to non-payment of premium, this benefit allows you to retain a reduced paid-up amount of coverage. You will have a revised Benefit Bank equal to the greater of: (a) 100% of the sum of all premiums paid; or (b) one times your Monthly Benefit. The revised Benefit Bank is reduced by any benefits previously paid.

Policy Limitations and Exclusions

Charges for care or services provided by a family member, as well as care or services for which no charge is made in the absence of insurance, are excluded under the reimbursable covered expenses portion of the policy. However, such care or services may be payable under the Flexible Benefit.

No benefits, including the Flexible Benefit, will be payable under this Policy for: a loss that occurs while this Policy is not in force; or an illness, treatment or medical condition that is due to war or act of war, whether declared or not; or an illness, treatment or medical condition that results from an attempt of suicide (while sane or insane) or an intentionally self-inflicted injury; or expenses for treatment or rehabilitation related to alcoholism or drug addictions; or expenses for services or items to the extent that such expenses are reimbursable under Medicare, or would be so reimbursable but for the application of a deductible or coinsurance amount; or care or services, unless otherwise required by law, for which benefits are duplicated or provided under a governmental program (except Medicaid), any state or federal workers' compensation, employer's liability or occupational disease law, or any motor vehicle no-fault law; or care or services provided outside the United States of America, its territories or possessions, or Canada.

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Supporting Document Schedules

	Item Status:	Status
		Date:
Satisfied - Item:	Statement of Variability	
Comments:		
Attachment:		
LS-0378B ST 05 10_CENSUS_V 1 0 (2).pdf		

EXPLANATION OF VARIABILITY

LIFESECURE MULTI-LIFE PROPOSAL FOR LONG TERM CARE INSURANCE

“CENSUS” VERSION (LS-0378B ST 05/10)

Page 1

- The following bracketed items will be populated with information specific to the multi-life employer/association receiving the quote:
 - Employer/Association name
 - Agent Name
 - Agent Address
 - Agent Phone
 - Date
 - State Name

Page 2

- In Row 1, the asterisk(s) beside Plan A, B and/or C and corresponding footnote at bottom of list will **only** appear if:
 - a. the state offers partnership;
 - b. LifeSecure Insurance Company's product is approved for partnership in the state; and
 - c. the plan design being quoted is partnership-qualified.

The footnote will appear if at least one of the plan designs being quoted is partnership-qualified. The “state name” in footnote will match state name on page 1.

- In **Benefit BankSM Amount** and **Monthly Benefit Access** rows, amounts will vary.
- In **Inflation Protection Option** row, each plan design will display one of the following items:
 - **Guaranteed Future Purchase Offers**
 - **Automatic 5% Compound**
 - **Automatic 3% Compound**
- The following Optional Benefits will appear in proposal **only** if included in at least one of the three plan design quoted:
 - **Money-Back PromiseSM Option**
 - If appearing on proposal, each plan design will display either:
 - **Included**
 - **Excluded**
 - **Lapse Protection Benefit**
 - If appearing on proposal, each plan design will display either:
 - **Included**
 - **Excluded**
 - **Employer Contribution Discount**
 - If the multi-life group qualifies for discount, row will display with 5% in all columns.
 - **Discount**
 - If an association or non-employer group qualifies for a discount, row will display 5% in all columns.

- In the Premium Payment Option row, one of the following options will appear for each plan design being quoted:
 - **Lifetime**
 - **10-Year**
 - **To-Age-65**
- The following items will vary:
 - Names of eligible participants
 - Ages of eligible participants
 - Monthly premium amounts (based on age and plan design)
 - Total monthly premium amounts
 - Average monthly premium amounts
 - Total annual premium amounts
 - Average annual premium amounts
- The dagger(s) beside the names of Eligible Participants and corresponding footnote(s) on page 3 will **only** appear if:
 - The agent indicates that the participant may be eligible for the 10% Spouse/Domestic Partner discount
 - OR**
 - The agent indicates that the participant may be eligible for the 30% Couple's discount

The footnote(s) will appear if at least one eligible participant on the census quoted may be eligible for one of the discounts listed above.

Page 3

The following footnote will appear for groups that qualify for the LifeSecure multi-life program:

The premiums shown above are for illustrative purposes only. [These monthly premiums include an employer contribution discount percentage as shown above.] A spouse/domestic partner or couple's discount may also apply to individual applicants. Each applicant must complete an Application and must qualify for coverage based on LifeSecure's underwriting criteria, which includes an applicant's age, health history and current health conditions. This proposal is valid for individuals ages 18--84 submitting applications for LifeSecure's individual long term care insurance in the state of [state name].

(The "state name" in footnote will match state name on page 1.)

The following footnote will appear for groups that **do not** qualify for the LifeSecure multi-life program:

The premiums shown above are based on LifeSecure's 'Preferred' rate class and are for illustrative purposes only. An applicant's actual premium rate class will be based on his/her own age, health history, current health conditions and other underwriting criteria. A spouse/domestic partner or couple's discount may also apply to individual applicants. Each applicant must complete an Application and must qualify for coverage based on LifeSecure's underwriting criteria. This proposal is valid for individuals ages 18--84 submitting applications for LifeSecure's individual long term care insurance in the state of [state name].

(The “state name” in footnote will match state name on page 1.)

The following footnote will appear if at least one eligible participant on the census quoted may be eligible for the Spouse/Partner discount:

† These monthly premiums, as illustrated, include a 10% spouse/domestic partner discount.

The following footnote will appear if at least one eligible participant on the census quoted may be eligible for the Couple’s discount:

†† These monthly premiums, as illustrated, include a 30% couple's discount (assuming that both spouses/domestic partners apply for coverage and policies are issued). Note: if one spouse/domestic partner does not apply or the policy is not issued, a 10% spouse/domestic partner discount will apply to the other’s policy.

Page 4

The **Guaranteed Future Purchase Offers** paragraph will only appear if this feature is included in one of the plan designs being quoted.

Page 5

The following paragraphs will only appear if the option is included in one of the plan designs being quoted.

- Money-Back PromiseSM Option
- Automatic 3% Compound Inflation Protection Benefit
- Automatic 5% Compound Inflation Protection Benefit
- Lapse Protection Benefit